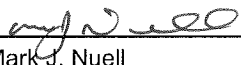


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

|  |  |                          |                        |
|--|--|--------------------------|------------------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3> |  | <b>Complete if Known</b> |                        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | Application Number       | 10/522,877-Conf. #5247 |
|  |  | Filing Date              | February 2, 2005       |
|  |  | First Named Inventor     | Takehiko NOMURA        |
|  |  | Examiner Name            | S.R. Macauley          |
|  |  | Art Unit                 | 1651                   |
| TOTAL AMOUNT OF PAYMENT  |  | (\$ ) 1,110.00           |                        |
|  |  | Attorney Docket No.      | 0020-5340PUS1          |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |  |
| <input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>                            |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>                                     |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments             |  |

| <b>FEE CALCULATION</b>  |                     |   |                                |                       |                                  |                       |                              |
|---|---------------------|---|--------------------------------|-----------------------|----------------------------------|-----------------------|------------------------------|
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                                |                       |                                  |                       |                              |
| Application Type  | FILING FEES         |   | SEARCH FEES                    |                       | EXAMINATION FEES                 |                       | Fees Paid (\$)               |
|   | Fee (\$)            | Small Entity Fee (\$)                                   | Fee (\$)                       | Small Entity Fee (\$) | Fee (\$)                         | Small Entity Fee (\$) |                              |
| Utility   | 330                 | 165   | 540                            | 270                   | 220                              | 110                   |                              |
| Design  | 220                 | 110   | 100                            | 50                    | 140                              | 70                    |                              |
| Plant   | 220                 | 110   | 330                            | 165                   | 170                              | 85                    |                              |
| Reissue   | 330                 | 165   | 540                            | 270                   | 650                              | 325                   |                              |
| Provisional   | 220                 | 110   | 0                              | 0                     | 0                                | 0                     |                              |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                                |                       |                                  |                       |                              |
| <b>Fee Description</b>  |                     |   |                                |                       |                                  | <b>Fee (\$)</b>       | <b>Small Entity Fee (\$)</b> |
| Each claim over 20 (including Reissues)   |                     |   |                                |                       |                                  | 52                    | 26                           |
| Each independent claim over 3 (including Reissues)  |                     |   |                                |                       |                                  | 220                   | 110                          |
| Multiple dependent claims   |                     |   |                                |                       |                                  | 390                   | 195                          |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b>  | <b>Multiple Dependent Claims</b> |                       |                              |
| 12 - 37 or HP   |                     | 0   | x 52.00 =                      | 0.00                  |                                  |                       |                              |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                                |                       |                                  |                       |                              |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b>  |                                  |                       |                              |
| 2 - 7 or HP   |                     | 0   | x 220.00 =                     | 0.00                  |                                  |                       |                              |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                                |                       |                                  |                       |                              |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                                |                       |                                  |                       |                              |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                                |                       |                                  |                       |                              |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                                | <b>Fee (\$)</b>       | <b>Fee Paid (\$)</b>             |                       |                              |
|   | - 100 =             | /50 =   | (round up to a whole number) x | =                     |                                  |                       |                              |
| <b>4. OTHER FEE(S)</b>  |                     |   |                                |                       |                                  |                       |                              |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                                |                       |                                  |                       |                              |
| Other (e.g., late filing surcharge): 1253 Extension for response within third month   |                     |   |                                |                       |                                  | 1,110.00              |                              |

|                     |   |                                   |                   |
|---------------------|---|-----------------------------------|-------------------|
| <b>SUBMITTED BY</b> |   |                                   |                   |
| Signature           |  | Registration No. (Attorney/Agent) | 36,623            |
| Name (Print/Type)   | Mark J. Nuell   | Telephone                         | (858) 356-5959    |
|                     |   | Date                              | November 07, 2008 |